

ENVIRONMENTAL PROTECTION AGENCY

Recommendation for Incentive Award

Instructions:

- 1. Awards should be based on EPA policy for award types, amounts and approval level (signature) requirements. For additional information on approval level requirements for awards, refer to the EPA Delegations Manual.
- 2. For detailed information on awards, review the EPA Recognition Policy and Procedures Manual.
- 3. Complete this form for all Individual Cash Awards (award amount less than \$5000 and FY cumulative is less than \$5000), Onthe-Spot Awards (FY cumulative is less than \$5000) and Time-Off Awards.
- 4. Attach the completed form to the electronic Request for Award. **For Use with FPPS Only Do Not Send Hardcopy to SPO**
- 5. Provide a copy of the completed form to the employee when the electronic award has been processed.

112			10. 30				17.0	
Employee Name:		Philip Edwin Baker		Employee ID #:		(b) (6	(b) (6)	
Position Title (optional):		Program Analyst		PP-Series-Grade (optional):		GS-03	GS-0343-13	
Organization (optional):		F	O000AAAI			-		
Type of Award: ✓		Individu	Spot Award (Individual Cas ial Cash Award (Non-Rating f Award		ating Based)	Group Cas Group Tim	h Award ne Off Award	
Total Amount o	of Award (\$):	\$1,800.00		AND/OR Total Number of Hours:		s: 18	18.00	
Type of Benefits on which the award is based (Cash awards only): ✓ Tangible Benefit Intangible Ben						Intangible Benef	ìt	
Value of Benefi	t:	1	Moderate	Substantial	Hi	gh	Exceptional	
Extent of Contribution:			Limited	Extended	Br	oad	General	
Narrative Justification for Award:								
Phil demonstrates a strong will to seek additional opportunities, duties and responsibilities to assist FMSD management in areas of need. He has eagerly volunteered to help and assist on issues beyond his job description, and is willing to go above and beyond to support the FMSD Team. Phil continues to support his colleagues by serving as the funds control officer for FMSD CORs and purchase card holders. This requires close communication with the contracts office and his colleague, as well as the FMSD Management Team to ensure FMSD staff meets agency requirements for billing and contract administration.								
This nomination also reflects the valuable support Phil provided to the HQ COVID-19 building safety team and the 2020/21 HQ Space Consolidation Project. Working with the HQ Operations team, he supported several key activities implementing COVID safety protocols for employees to return to work. These activities included installing COVID safety signage and escorting contractors providing PPE supplies for employee and visitor safety. His efforts for the Consolidation project included contractor coordination and general project management. Throughout these projects he is an active participant who works with agency staff, contractors and FMSD staff to complete numerous								
Requesting Official:				Authorizing Official:				
Name:	Nei	l Ste	wart	Name:	Alva	Daniels	-11	
Position Title:	Acting D	eputy	/ Director	Position Title:	Deputy [Director,	OA	
Signature:	NEIL STEW	ART STEV	2021 05:10 08:05:39	Signature:	ALVA DANIEL	Digitally signed by ALDANIELS Date: 2021.05.10 10: -04'00'		
As the Authorizing Official I certify with electronic signature that all necessary concurrences have been gained for approval of this award in addition to								

As the Authorizing Official Learning with electronic signature that all necessary concurrences have been gained for approval of this award in addition to verification that the award amount is not \$5000 or greater and that the FY cumulative award amount(s) for this employee is not \$5000 or greater.